

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	J. G.		4/22/94
FORMALITY REVIEW	[Signature]	641615	5-11-94

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	4/22/94
2	✓	✓	4/22/94
3	✓	✓	4/22/94
4	✓	✓	4/22/94
5	✓	✓	4/22/94
6	✓	✓	4/22/94
7	✓	✓	4/22/94
8	✓	✓	4/22/94
9	✓	✓	4/22/94
10	✓	✓	4/22/94
11	✓	✓	4/22/94
12	✓	✓	4/22/94
13	✓	✓	4/22/94
14	✓	✓	4/22/94
15	✓	✓	4/22/94
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25	✓	✓	4/22/94
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28	✓	✓	4/22/94
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39	✓	✓	4/22/94
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42	✓	✓	4/22/94
43	✓	✓	4/22/94
44	✓	✓	4/22/94
45	✓	✓	4/22/94
46	✓	✓	4/22/94
47	✓	✓	4/22/94
48	✓	✓	4/22/94
49	✓	✓	4/22/94
50	✓	✓	4/22/94

Claim	Final	Original	Date
51	✓	✓	4/22/94
52	✓	✓	4/22/94
53	✓	✓	4/22/94
54	✓	✓	4/22/94
55	✓	✓	4/22/94
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81	✓	✓	4/22/94
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99	✓	✓	4/22/94
100	✓	✓	4/22/94

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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